## FORM D

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D 14/9011

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

OMB	APPRO\	/A
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OMB Number: 3235-0076

Expires July 31, 2008

Estimated average burden 16.00 hours per response:

SEC USE ONLY Prefix Serial

JUL 162000	UNIFORM LIMITED	OFFERING EX	EMPTION		DATE RECEIVED
Mashington, DC					
Name of Offering (☐ check i	f this is an amendment and name h		dicate change.)		
	: Limited Liability Company U				
Filing Under (Check box(es)	that apply):   Rule 504	Rule 505	Rule 506 □	Section 4(6)	□ ULOE
Type of Filing: 🔲 New F					
	A. BASIC	IDENTIFICAT	ION DATA		
<ol> <li>Enter the information requ</li> </ol>	uested about the issuer				
Name of Issuer (□ check i	f this is an amendment and name h	as changed, and in	dicate change.)		
Pictet: Non-US Equity LLC	,				
Address of Executive Offices	(Number and Stre	et, City, State Zip (	Code)	Telephone Numb	per (including Area Code)
One New York Plaza, New	York, New York 10004			(212) 902-10	00
Address of Principal Busines	s Operations (Number and S	treet, City, State and	d Zip Code)	Telephone Nur	
(if different from Executi	ve Offices)		<b>PROCES</b>	CED	
Brief Description of Busines:	2		····	SED	! [64]
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To operate as a private	mvestment tung.			- •	08056351
Type of Business Organization	on		OMSON DE	UTERS  Other (please	00000001
☐ corporation		rtnership, already for	ormed	other (please	specify):
☐ business trust	☐ limited pa	rtnership, to be for	ned	Limited Liabilit	y Company
		Month	Year	_	_
Actual or Estimated Date of I	ncorporation or Organization:	0 9	0 7	☑ Actual	☐ Estimated
Jurisdiction of Incorporation	or Organization: (Enter two-	letter U.S. Postal S	ervice abbreviati	on for	
-	State: CN f	or Canada; FN for o	other foreign juris	sdiction )	D E
CENERAL INSTRUCTIONS					

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA	
2. Enter the information requested for the following:	
* Each promoter of the issuer, if the issuer has been organized within the past five years;	
* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equiposition of the issuer;	y securities
* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers;	and
* Each general and managing partner of partnership issuers.	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑ General and/or Managing Partn	er
Full Name (Last name first, if individual)	
Goldman Sachs Asset Management, L.P. (the Issuer's Managing Member)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
One New York Plaza, New York, New York 10004  Check Box(es) that Apply:  Promoter Beneficial Owner Executive Officer* Director General and/or	
Check Box(cs) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer* ☐ Director ☐ General and/or * of the Issuer's Managing Member Managing Partners	er
Full Name (Last name first, if individual)	
Asali, Omar M.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
One New York Plaza, New York, New York 10004	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director ☐ General and/or * of the Issuer's Managing Member Managing Partn	er
Full Name (Last name first, if individual)	<u> </u>
Barbetta, Jennifer	
Business or Residence Address (Number and Street, City, State, Zip Code)	
One New York Plaza, New York, New York 10004	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer* ☐ Director ☐ General and/or * of the Issuer's Managing Member ☐ Managing Partn	er
Full Name (Last name first, if individual)	
Gottlieb, Jason	
Business or Residence Address (Number and Street, City, State, Zip Code)	
One New York Plaza, New York, New York 10004	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director ☐ General and/or * of the Issuer's Managing Member Managing Partn	ег
Full Name (Last name first, if individual)	-
Ort, Peter	
Business or Residence Address (Number and Street, City, State, Zip Code)	
One New York Plaza, New York, New York 10004	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director ☐ General and/or * of the Issuer's Managing Member ☐ Managing Partr	er
Full Name (Last name first, if individual)	
Ross, Hugh M.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
One New York Plaza, New York, New York 10004	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partn	er
Full Name (Last name first, if individual)	

Business or Residence Address (Number and Street, City, State, Zip Code)

1. Has the issuer sold, or does the issuer intend to sell, to non-accordited investors in this officing:					R. IN	FORMAT	ION ABO	OUT OFF	ERING		<u>-</u>		
1. Has the issuer sold, or does the issuer intend to sell, to non-occredited investors a this offering?		<del></del>			D. 11.	1 014,111	10111100	, CI 011	DILLI ( O			Yes	No
Answer also in Appendix, Column 2, if filting under ULOE.   \$   **	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?												
Note	• •												
The Insteur's Manager may in its sole discretion accept subscription amounts in whatever amount it determine	2 What i												
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4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an account of eacher, such as the state of a securities in the offering. If a person to be listed is an account of eacher, such as the chart of eacher of eacher or dealer only.  Full Name (Last name first, if individual)  Goldman, Sachs & Co.*  *Although the securities will be sold through Goldman, Sachs & Co., no commissions will be paid, directly or indirectly, for soliciting any purchaser in any jurisdiction.  Business or Residence Address (Number and Street, City, State, Zip Code)  85 Broad Street, New York, New York 10004  Name of Associated Broker or Dealer  States in Which Person. Listed Has Solicited or Intends to Solicit Purchasers  (Check 'All States' or check individual States)											Yes	No	
L'a person cost be listed is an associated person or agent of a broker or dealer rejisted with the SEC and/or with sales or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.  Full Name (Last name first, if individual)  Goldman, Sachs & Co.*  *Although the securities will be sold through Goldman, Sachs & Co., no commissions will be paid, directly or indirectly, for soliciting any purchaser in any jurisdiction.  Business or Residence Address (Number and Street, City, State, Zip Code)  85 Broad Street, New York, New York 10004  Name of Associated Broker or Dealer  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual)  [ILL] [IN] [IA] [KS] [KS] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [ILL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MI] [MN] [MS] [MO] [MI] [MN] [MS] [MO] [MN] [MN] [MN] [MN] [MN] [MN] [MN] [MN										Ø			
If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.  Full Name (Last name first, if individual)  Goldman, Sachs & Co.**  *Although the securities will be sold through Goldman, Sachs & Co., no commissions will be paid, directly or indirectly, for soliciting any purchaser in any jurisdiction.  Business or Residence Address (Number and Street, City, State, Zip Code)  **Streat, New York, New York, New York 10004*  Name of Associated Broker or Dealer  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any												
or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set torth the information for that broker or dealer only.  Full Name (Last name first, if individual)  Goldman, Sachs & Co.*  *Although the securities will be sold through Goldman, Sachs & Co., no commissions will be paid, directly or indirectly, for soliciting any purchaser in any jurisdiction.  Business or Residence Address (Number and Street, City, State, Zip Code)  85 Broad Street, New York, New York 10004  Name of Associated Broker or Dealer  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)  (Check "All States" or check individual St													
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States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)	85 Broad	Street, Nev	v York, Ne	w York 10	004								
Check "All States" or check individual States	Name of A	Associated E	Broker or De	ealer					•				
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$_	0	\$	0
	Equity	\$	0	\$	0
	☐ Common ☐ Preferred				-
	Convertible Securities (including warrants)	\$_	0	\$	0
	Partnership Interests	\$_	0	\$	0
	Other (Specify): Limited Liability Company Units	\$_	278,025,698	\$	278,025,698
	Total	\$	278,025,698	\$	278,025,698
	Answer also in Appendix, Column 3, if filing under ULOE.	_			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	_	290	\$	278,025,698
	Non-accredited Investors	_	0	\$	0
	Total (for filings under Rule 504 only)		N/A	\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.				
	Type of offering		Type of Security		Dollar Amount Sold
	Rule 505		N/A	\$	N/A
	Regulation A	-	N/A	•	N/A
	Rule 504	-	N/A	\$	N/A
	Total			\$ \$	
	Total	-	N/A	ૐ.	N/A
th th	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees.			\$	0
	Printing and Engraving Costs			\$	0
	Legal Fees		Ø	\$	91,824
	Accounting Fees			\$	0
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify)			\$	0
	Total		$\mathbf{Z}$	\$	91,824

	C. OFFERING PRICE, NUME	BER OF INVESTORS, EX	PENS	ES A	AND USE OF P	ROCE	EDS	
	b. Enter the difference between the aggregate off - Question 1 and total expenses furnished in res difference is the "adjusted gross proceeds to the issue."	sponse to Part C - Question 4.	a. Thi	is		\$_		277,933,874
	Indicate below the amount of the adjusted gross p to be used for each of the purposes shown. If the furnish an estimate and check the box to the le payments listed must equal the adjusted gross proof to Part C - Question 4.b. above.	e amount for any purpose is not left of the estimate. The total	known lof th	n, ie				
					Payments to Officers, Directors, & Affiliates			Payments To Others
	Salaries and Fees			\$_	0	_ 🗆	\$_	0
	Purchase of real estate			\$_	0	_ 🗆	\$_	0
	Purchase, rental or leasing and installation of mach	hinery and equipment		\$_	00	_ 🗆	\$_	0
	Construction or leasing of plant buildings and facil	ilities		\$_	0		\$_	0
	Acquisition of other businesses (including the val this offering that may be used in exchange for another issuer pursuant to a merger)	r the assets or securities of		•	0	-	•	0
			_		•	<b>-</b>	<b>-</b>	<u> </u>
	Repayment of indebtedness			\$_	0		\$_	0
	Working capital			<b>\$</b> _	0	_ 📮	\$_	0
	Other (Specify): Limited Liability Company Unit	its		\$_	0	_ 🗷	\$_	277,933,874
	Column Totals			\$_	0	_ 🗹	\$_	277,933,874
	Total Payments Listed (column totals added)		•••••		፟ \$	277,9	33,87	4
		D. FEDERAL SIGNATU	RE			-		
fc	the issuer has duly caused this notice to be signed ollowing signature constitutes an undertaking by the fits staff, the information furnished by the issuer to a	e issuer to furnish to the U.S. S	ecuriti	es an	d Exchange Com	mission,	upon	
SSL	uer (Print or Type)	Signature			Date			
'ic	tet: Non-US Equity LLC	Dail/des			July <u>//</u> 2008			
	ne of Signer (Print or Type)	Title of Signer (Print or Type)						
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ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).